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CONFIRMATION NO. 4886

<b>SERIAL NUMBER</b> 10/648,874	<b>FILING OR 371(c) DATE</b> 08/27/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 100718- / Beiersdorf 633.	
<b>APPLICANTS</b> Gunhild Hamer, Hamburg, DE; Kerstin Heike, Hamburg, GERMANY; Waltraud Kaden, Hamburg, GERMANY; Rainer Kropke, Schenefeld, GERMANY; Ghita Lanzendorfer, Hamburg, GERMANY; Gunther Schneider, Hamburg, GERMANY;					
<b>** CONTINUING DATA *****</b> This application is a CON of 09/622,090 02/14/2001 ABN which is a 371 of PCT/EP99/00581 01/29/1999					
<b>** FOREIGN APPLICATIONS *****</b> GERMANY 198 05 918.3 02/13/1998					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/18/2003</b>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>SAO</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> DE	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 10	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 27384					
<b>TITLE</b> Cosmetic or dermatological oil/water emulsions with reduced lipid content					
<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		